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Attorney Docket No.

DECLARATION FOR PATENT APPLICATION

As below named inventor, I hereby declare that my residence, post office address and citizenship are as stated below.

I believe that I am the original, first and sole inventor of the matter which is claimed and for which a patent is sought on the invention titled: LAPAROSCOPIC-ASSISTED ENDOVASCULAR GRAFT PLACEMENT, the specification of which is attached hereto.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, § 1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s) NONE	Priority claimed		
(Number)	(Country)	(Date filed)	
I hereby claim the benefit of Ti	tle 35, United States Code. §120 of any U	United States application(s) listed below	

I hereby claim the benefit of Title 35, United States Code. § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, U.S. Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, Sect. 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

NONE		
(Application Serial No.)	(Filing date)	(Status)

I hereby appoint the following attorney to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith:

Address all correspondence and telephone calls to:

Harris Zimmerman, Esq. Registration No. 16,437 1330 Broadway, Suite 710 Oakland, California 94612 [510] 465-0828

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under § 1001 of Title 18 of the U.S. Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Inventor's Full N	Name: Lee L. Swanstrom	Citizenship:	US
Residence:	Portland, Oregon		
	(City & State only)		
P. O. Address:_	50! North Graham Street, Suite 120, Portland, Oregon 97227		
	(Complete address)		

Signature: x

Date: x ///5/6/